Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
, ,		
Northern District of: Illinois (State)		
Case number (if known)	Chapter you are filing under:	
	✓ Chapter 7	
	Chapter 11	
	Chapter 12	Check
	Chapter 13	amend

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Gregory	
	Write the name that is on	First name	First name
	your government-issued picture identification (for	Middle name	Middle name
	example, your driver's	Ward	
license or passport Last name Last name	Last name		
	Bring your picture identification to your meeting with the trustee.	Jr Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the	First name	First name
	last 8 years		-
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your	XXX - XX- 0153	xxx - xx-
	Social Security number or federal	OR	OR
	Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
	number (ITIN)		

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 2 of 70

De	ebtor 1 Gregory	L Ward	Case number (if known)
	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer		✓ I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the	Business name	Business name
	last 8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live	F7F0 December I Del	If Debtor 2 lives at a different address:
		5752 Breezeland Rd. Number Street	Number Street
		Carpentersville Illinois 60110	
		City State Zip Code Kane	City State Zip Code
		County	County
		•	
		If your mailing address is different from the one above, fil it in here. Note that the court will send any notices to you at this mailing address.	
		Number Street	Number Street
		City. Class 7:2 Code	
		City State Zip Code	City State Zip Code
6.	Why you are choosing this	Check one:	Check one:
	district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
			-
			-
			-

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 3 of 70

Debtor 1 Gregory First Name	L Middle Name	Ward Last Name	Case number (if known)	
Part 2: Tell the Court Ab	out Your Bankruptcy	Case		
7. The chapter of the Bankruptcy Code you are choosing to file under		scription of each, see <i>Notice Required</i> and of page 1 and check the appropriate bo		riduals Filing for Bankruptcy (Form
8. How you will pay the fee	court for more det may pay with cast on your behalf, yo I need to pay the Individuals to Pay I request that my By law, a judge meless than 150% of the fee in installm	ire fee when I file my petition rails about how you may pay. The hearth about how you may pay. The hearth about how you may pay with a creative fee in installments. If you chear your Filing Fee in Installments (after the waived (You may requally, but is not required to, waived the official poverty line that appends). If you choose this option waived (Official Form 103B)	ypically, if you are paying rder If your attorney is dit card or check with a cose this option, sign are Official Form 103A). The est this option only if your fee, and may doe polies to your family size on, you must fill out the Arman in the Arman	ng the fee yourself, you is submitting your payment pre-printed address. Indicate the Application for the property of the pro
9. Have you filed for bankruptcy within the last 8 years?	Ves. District District District	When When When	Case num MM / DD / YYYY	nber
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	V No. Yes. Debtor District Debtor District	When When	Relationsl Case num MM / DD / YYYY Relationsl	ber, if known
11. Do you rent your residence?	✓ No. Go to	rd obtained an eviction judgment against line 12. ut <i>Initial Statement About an Eviction Jud</i> ankruptcy petition.		

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 4 of 70

Part 3: Report About Any Businesses You Own as a Sole Proprietor						
at it can set appropriate se sheet, statement of ist, follow the procedure in 11						
efinition in the						
n in the Bankruptcy Code.						
attention						
attorner and a state of the sta						
Zip Code						

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 5 of 70

Debtor 1	Gregory	L	Ward	Case number (if known)	
	F:	A C I II A I		•	

First Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment one of the following you MUST file a copy of the certificate and payment plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 6 of 70

Debtor 1 Gregory		Vard Case number (if k	nown)		
First Name		ast Name			
Part 6: Answer These Qu	uestions for Reporting Purpos				
16. What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 				
17. Are you filing under Chapter 7?					
Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any after any exempt paid that funds will be available to distribute to unsecured property is excluded			y is excluded and administrative expenses are		
and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes.				
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Part 7: Sign Below					
For you	and correct. If I have chosen to file under C 11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me a me fill out this document, I have I request relief in accordance of I understand making a false state.	Chapter 7, I am aware that I may properties that I may property. Ind I did not pay or agree to pay so we obtained and read the notice required with the chapter of title 11, United Statement, concealing property, or obtained case can result in fines up to \$250, 52, 1341, 1519, and 3571.	states Code, specified in this petition. otaining money or property by fraud in		
	Executed on 10/27/2016 Executed on MM / DD / YYYY MM / DD / YYYY				

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 7 of 70

Debtor 1	Gregory	L	Ward	Case number	(if known)		
	First Name	Middle Name	Last Name				
For your attorney, if you are represented by one If you are not represented by an attorney, you do not		I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
need to	o file this page.	/s/ Yisroel Y Mosko Signature of Attorney		Date	10/27/2016 MM / DD / YYYY		
		Yisroel Y Moskovits Printed name Semrad Law Firm Firm name 10 N. Martingale Roa Street Suite 400	d				
		Schaumburg		Illinois	60173		
		City		State	Zip Code		
		Contact phone	3122543191	Email address	imoskovits@semradlaw.com		
				Illin	ois		
		Bar number		Star	te		

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 8 of 70

Fill in this information to identify your case:						
Debtor 1	Gregory	L	Ward			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	ng) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number (If known)			(State)			

Check if this is ar
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$2,319.30
1c. Copy line 63, Total of all property on Schedule A/B	\$2,319.30
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$5,710.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$20,170.00
Your total liabilities	\$25,880.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,694.46
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$1,695.00

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 9 of 70

Del	btor 1 Gr		L	Ward	Case number (if known)	
		st Name	Middle Name	Last Name		
Par	t 4: An	iswer These Que	estions for Administr	ative and Statistical Re	ecords	
6. A	Are you f	iling for bankruptcy	under Chapters 7, 11, or	13?		
	No.`	You have nothing to re	port on this part of the form	. Check this box and submit this	s form to the court with your other schedules.	
	✓ Yes.					
7. V	What kin	d of debt do you ha	ive?			
				mer debts are those incurred by out lines 8-10 for statistical put	y an individual primarily for a personal, rposes. 28 U.S.C. § 159.	
		r debts are not prima form to the court with y		u have nothing to report on this	part of the form. Check this box and submit	
8.			r Current Monthly Incom m 122B Line 11; OR, Form	ne: Copy your total current mor 122C-1 Line 14.	nthly income from Official	\$1,908.61
9.	Copy t	the following special	categories of claims from	m Part 4, line 6 of Schedule	E/F:	
	From F	Part 4 on Schedule E	E/F, copy the following:		Total claim	
	9a. Doi	mestic support obligat	ions (Copy line 6a.)		\$0.00	
	9b. Tax	es and certain other d	ebts you owe the governme	nt. (Copy line 6b.)	\$0.00	
	9c. Cla	ims for death or perso	nal injury while you were in	toxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line 6f.) \$4,750.00				\$4,750.00	
		Obligations arising out of a separation agreement or divorce that you did not report as		as <u>\$0.00</u>		
		claims. (Copy line 6g			\$0.00	
	9f. Deb	ots to pension or profit-	-sharing plans, and other si	milar debts. (Copy line 6h.)	<u> </u>	
	9g. To t	tal. Add lines 9a throu	gh 9f.		\$4,750.00	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 10 of 70

Fill in this	information	to identify your cas	e:					
Debtor 1	Greg	jory	L		Ward			
Debtor 2	First	Name	Middle N	Name	Last Name			
	if filing) First	Name	Middle N	Name	Last Name			
United St	ates Bankrup	otcy Court for the:	Northern		District of Illinois			
Case nun					(State)			
Officia	al Form	106A/B						Check if this is an amended filing
Sche	dule A	/B: Prope	ertv					12/1
category v responsik write your	where you to ble for support name and o	hink it fits best. B lying correct info case number (if ki	e as complete and rmation. If more s nown). Answer ev	id acc space /ery q	sset only once. If an asset fits in more th urate as possible. If two married people is needed, attach a separate sheet to the uestion. d, or Other Real Estate You Own	are fi nis fo	iling together, both are rm. On the top of any a	equally dditional pages,
			juitable interest in	n any	residence, building, land, or similar prop	perty?	?	
	No. Go to F Yes. Where	Part 2 is the property?		\ A/!-	at is the warmant of Charles I she to such		De cost ded est en consider	leine an annual and Dut
1.1					at is the property? Check all that apply. Single-family home		the amount of any secure	laims or exemptions. Put ed claims on Schedule D:
	Street addr	ess, if available, or	other description		Duplex or multi-unit building		Current value of the	ims Secured by Property. Current value of the
					Condominium or cooperative Manufactured or mobile home		entire property?	portion you own?
				ш	Land			
	Number	Street	Zin Codo	Ħ	Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
	City	State	Zip Code	Who	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	ζ.	Check if this is con (see instructions)	mmunity property
				Oth-	er information you wish to add about th perty identification number <u>:</u>	is ite	m, such as local	
If you		more than one, list ress, if available, or			at is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home		the amount of any secure	laims or exemptions. Put ad claims on Schedule D: nims Secured by Property. Current value of the portion you own?
	Number	Street		Ħ	Land Investment property Timeshare		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
	City	State	Zip Code	Who one.	Other Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another er information you wish to add about the perty identification number:		Check if this is co (see instructions)	mmunity property

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 11 of 70

Debtor 1	Gregory First Name	L Middle Name	Ward Last Name	Case number	(if known)	
1.3	et address, if available, or othe		hat is the property? Check all that app I Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	ly.	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?	•
Nun		Zip Code	Investment property Timeshare Other		Describe the nature of interest (such as fee sinthe entireties, or a life of the entireties).	mple, tenancy by
			ho has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another her information you wish to add abo		Check if this is cor	nmunity property
		pro on you own for all	operty identification number: of your entries from Part 1, including	g any entries	s for pages	
Do you ov you own th 3. Cars, va	at someone else drives. If you le ins, trucks, tractors, sport utility	ease a vehicle, also	any vehicles, whether they are regist report it on Schedule G: Executory Cont les			
3.1	Make Model: Year: Approximate mileage:		Who has an interest in the propert one. Debtor 1 only	y? Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla	•
	Other information: 2004 Chevy Impala		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community propinstructions)		Current value of the entire property? \$769.00	Current value of the portion you own? \$769.00
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the propert one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only		Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?	•
			At least one of the debtors and and Check if this is community projinstructions)			

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 12 of 70

Debtor 1	Gregory First Name	L Middle Name	Ward Last Name	Case number	(if known)		
2.2		ivildale Name		ranartu 2 Chaala	Do not doduct accur	ad daima ar avamatiana	Durt
3.3	Make Model:		Who has an interest in the pone.	roperty r Check		ed claims or exemptions. cured claims on <i>Schedu</i>	
	Year:		Debtor 1 only		· ·	e Claims Secured by Pro	
	Approximate mileage:		Debtor 2 only				
	Other information:		Debtor 1 and Debtor 2 only		Current value of the entire property?	ne Current value of portion you own?	
	Other information.		At least one of the debtors a		——————————————————————————————————————	————	•
			Check if this is communi	ty property (see			
			,				_
3.4	Make		Who has an interest in the p	roperty? Check		ed claims or exemptions. cured claims on <i>Schedu</i>	
	Model: Year:	one.			•	e Claims Secured by Pro	
	Approximate mileage:		Debtor 1 only		Ordanoro Who Have	o ciamino document by 1 10	porty.
			Debtor 2 only Debtor 1 and Debtor 2 only		Current value of the		
	Other information:	Other information:			entire property?	portion you own?	portion you own?
			At least one of the debtors a	and another			
			Check if this is commun	ty property (see			
			instructions)				
4.1	Yes Make		Who has an interest in the p	roperty? Check		ed claims or exemptions.	
	Model: Year:		one. Debtor 1 only		•	e Claims Secured by Pro	
	Approximate mileage:		Debtor 2 only		Ordanoro Who Have	Claimo Cocarca by 1 10	porty.
					Current value of the		
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?	ſ
			At least one of the debtors a				
			Check if this is communing instructions)	ty property (see			
4.2	Make		Who has an interest in the p	roperty? Check	Do not deduct secur	ed claims or exemptions.	. Put
	Model:		one.		•	cured claims on Schedu	
	Year:		Debtor 1 only		Creditors Who Have	e Claims Secured by Pro	perty.
	Approximate mileage:		Debtor 2 only		Current value of the	ne Current value of	the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own	
			At least one of the debtors a	and another	-		
			Check if this is communi	ty property (see			
			instructions)				
	-	-	of your entries from Part 2, in			\$769.00	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 13 of 70

Part 3: Pescribe	Middle Name Last Name	
	Your Personal and Household Items	
	ave any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household good		
	oliances, furniture, linens, china, kitchenware	
No		
Yes. Describe	bed	\$200.00
7. Electronics Examples: Television	as and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
Yes. Describe	cellphone	
Tes. Describe	Celiptione	\$50.00
	lue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; bin, or baseball card collections; other collections, memorabilia, collectibles	
res. Describe		
	ports and hobbies hotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ks; carpentry tools; musical instruments	
IO. Firearms Examples: Pistols, ri No Yes. Describe	fles, shotguns, ammunition, and related equipment	
	clothes, furs, leather coats, designer wear, shoes, accessories	
No "		
Yes. Describe	Clothing	\$300.00
2. Jewelry Examples: Everyday gold, silv	jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er	
No Yes. Describe		
I3. Non-farm anima Examples: Dogs, ca No Yes. Describe		
Too. Booombo		
4. Any other perso	nal and household items you did not already list, including any health aids you did not list	_
4. Any other perso	nal and household items you did not already list, including any health aids you did not list	Ţ
14. Any other perso No Yes. Describe	nal and household items you did not already list, including any health aids you did not list	\$550.00

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 14 of 70

Debt	or 1	Gregory	L	Ward	Case number (if known)	
		First Name	Middle Name	Last Name		
Part	4:	Describe Your I	inancial Assets			
Do	you	own or have a	ny legal or equitable in	terest in any of the fol	lowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. C						
E			e in your wallet, in your home, in a	safe deposit box, and on hand	when you file your petition	
		No				
	Ш	Yes			Cash:	
17.	Exa		vings, or other financial accounts titutions. If you have multiple acc		s in credit unions, brokerage houses, , list each.	
	$\overline{\mathbf{V}}$	Yes		Institution name:		
			17.1. Checking account:	Bank of America		\$0.30
			17.2. Checking account:			
			17.3. Savings account:			
			17.4. Savings account:			
			17.5. Certificates of deposit:			
			17.6. Other financial account:			
			17.7. Other financial account:			-
			17.8. Other financial account:			
			17.9. Other financial account:			
18.			or publicly traded stocks			-
	Exa	mples: Bond funds, ir	nvestment accounts with brokerag	ge firms, money market accoun	ts	
		No	Institution or issuer name:			
	Ш	Yes	mondadir or loader ridiner			
19.		ı-publicly traded st ـLC, partnership, a		ated and unincorporated bu	sinesses, including an interest in	
	$\overline{}$	No				
	=	Yes. Give specific	Name of entity		% of ownership:	
		information about				
		them				

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 15 of 70

Debt	tor 1	Gregory	L	Ward	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg Non	otiable instruments ir	orate bonds and other negotial adude personal checks, cashiers' onts are those you cannot transfer the lasuer name:	checks, promissory notes, and mo	ney orders.	
21.	Exa	irement or pension mples: Interests in IR No	accounts A, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other p	ension or profit-sharing plans	
	H	Yes. List each	Type of account:	Institution name:		
	ш	account	401(k) or similar plan:			
		separately.	Pension plan:			
			IRA:			
			Retirement account:			- <u></u> -
			Keogh:			
			Additional account:			
			Additional account:			
22.	You Exa		orepayments deposits you have made so that you with landlords, prepaid rent, public			
		Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:			
			Water:			
			Rented furniture:			
			Other:			
23.			a periodic payment of money to ye	ou, either for life or for a number of	years)	
		No Yes	Issuer name and description:			

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 16 of 70

Debt	or 1 Gregory First Name	L Middl	Ward e Name Last Name	Case number (if known)	
24.	Interests in a	n education IRA, in an ac	count in a qualified ABLE program	, or under a qualified state tuition program	
	_	530(b)(1), 529A(b), and 529	(b)(1).		
	✓ No Yes	Institution name and descri	ption. Separately file the records of any	v interests.11 U.S.C. § 521(c):	
25.		able or future interests in or your benefit	property (other than anything liste	d in line 1), and rights or powers	
	✓ No				
	Yes. Desc	cribe			
26.		<u> </u>	secrets, and other intellectual prop	-	
	_	rnet domain names, websit	es, proceeds from royalties and licensing	ng agreements	
	✓ No Yes. Desc	cribe]
27.		nchises, and other general		s, liquor licenses, professional licenses	
	✓ No				
	Yes. Desc	cribe			
Moi	ney or prope	erty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds o	wed to you			ciaims of exemptions.
	☐ No				
		specific information t them, including whether	Anticipated tax refund	Federal:	\$1000.00
	you a	he tax years		State:	\$0.00
00				Local:	\$0.00
29.	Family support Examples: Past		pousal support, child support, maintena	ance, divorce settlement, property settlement	
	✓ No			Allerano	#0.00
	Yes. Give	specific information		Alimony:	\$0.00
				Maintenance:	\$0.00
				Support:	\$0.00
				Divorce settlement:	\$0.00
30.	Other amount	s someone owes you		Property settlement:	\$0.00
JU.	Examples: Unp	aid wages, disability insurar	ce payments, disability benefits, sick pa loans you made to someone else	ay, vacation pay, workers' compensation,	
	✓ No	,, . ,	•		
	Yes. Desci	ribe]

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 17 of 70

Deb	otor 1 Gregory L	Ward	Case number (if known)	
	First Name Middle Nam	ne Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; h	ealth savings account (HSA); credit, ho	meowner's, or renter's insurance	
	✓ No Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died.		r are currently entitled to receive	
	✓ No ☐ Yes. Describe			
33.	Claims against third parties, whether or no Examples: Accidents, employment disputes, ins		lemand for payment	
	No ✓ Yes. Describe Potential Worker's Cor	npensation Claim - not current pursuing		
34.	Unknown Other contingent and unliquidated claims	of every nature, including countercl	aims of the debtor and rights	
	to set off claims No			
	Yes. Describe			
35.	Any financial assets you did not already list			
	✓ No			
	Yes. Describe			
36.	Add the dollar value of all of your entries fr for Part 4. Write that number here			\$1000.30
	Describe Any Dusiness Deleted	December Voy Over on House	laterat la l'at any real estate	in Dort 4
Part			Interest In. List any real estate	in Part 1.
37.	Do you own or have any legal or equitable i	Interest in any business-related prop		
	✓ No. Go to Part 6. Yes. Go to line 38.		p	urrent value of the ortion you own? o not deduct secured claims exemptions
38.	Accounts receivable or commissions you a	Iready earned		
	Yes. Describe			
39.	Office equipment, furnishings, and supplie Examples: Business-related computers, software		nes, rugs, telephones, desks, chairs, electro	nic devices
	✓ No Yes. Describe			

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 18 of 70

Deb	tor 1	Gregory	L	Ward	Case numb	per (if known)	
40.	Ma	First Name	Middle Name	Last Name use in business, and too	als of your trade		
10.	√	•	артот, саррное уса	aco in Bucinoco, ana toc	no or your trado		
	È	Yes. Describe					
41.	lnv	/entory					
	√	No					
	ř	Yes. Describe					
42.	Int	erests in partnership	ps or joint ventures				
		l _{No}	,				
	Г	Yes. Give specific		Name of entity:		% of ownership:	
		information about					
		them					
43. (Cus	tomer lists, mailing l	lists, or other compilat	ions			
	✓	No					
		Yes. Do your lists inc	clude personally identifial	ole information (as defined	in 11 U.S.C. § 101(41A))?		
		☐ No					
		Yes. Descri	be				
44.	An	y business-related p	roperty you did not alro	eady list			
	✓	No		•			
	Ē	Yes. Give specific					
		information					
							_
					es for pages you have atta		
		_					
Part	t 6:	If you own or have an	interest in farmland, list in	in Part 1.	Property You Own or	r Have an interest i	n.
46.	Do	you own or have an	ny legal or equitable in	erest in any farm- or con	nmercial fishing-related pro	operty?	
	✓	No. Go to Part 7.					Current value of the portion you own?
		Yes. Go to line 47.					Do not deduct secured
							claims or exemptions
47.		rm animals					5. 5
	Ex	ramples: Livestock, pou	ıltry, farm-raised fish				
	✓	_					
		Yes. Describe					
		L					

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 19 of 70

Deb	tor 1	Gregory	L	Ward	Case number (if known)	
40	<u> </u>	First Name	Middle Name	Last Name		
48.	Cro	pps-either growing o	or narvested			
	✓	No				
	Ш	Yes. Describe				
49.	Far	m and fishing equip	ment, implements, machinery, fixto	ures, and tools of trade		
	~	No				
	П	Yes. Describe				
50.	For	m and fishing sunni	es, chemicals, and feed			
50.	_		ies, chemicais, and feed			
		No Describe				
	Ш	Yes. Describe				
51.	An	y farm- and commer	cial fishing-related property you did	I not already list		
	✓	No				
		Yes. Describe				
4	-1-1-4	ha dallan valva af all	of vorm outside from Dest C. in alrest		have effected	
			of your entries from Part 6, includi nere			
					L	
Part	7:	Describe All Pro	perty You Own or Have an I	nterest in That You	Did Not List Above	
			erty of any kind you did not alread			
	Exa	mples: Season tickets	country club membership			
	✓	No				
		Yes. Give specific				
		information				
54. A	dd ti	ne dollar value of all	of your entries from Part 7. Write the	nat number here		
		1				
Part	8:	List the Totals of	f Each Part of this Form			
55. I	Part	1: Total real estate. li	ne 2			
			_			
56. r	art 2	2 total vehicles, line	5	\$769.00		
57. P	art 3	s: Total personal and	household items, line 15	\$550.00	_	
		: Total financial asse			_	
				\$1000.30	_	
59. I	art	5: Total business-re	ated property, line 45		_	
60. F	Part (6: Total farm- and fis	shing-related property, line 52		_	
61. I	art	7: Total other proper	ty not listed, line 54			
62. 1	Γotal	personal property.	Add lines 56 through 61	#0040.00	_	. (0040.00
		i mana proporty		\$2319.30	Copy personal property total ►	+ \$2319.30
						\$2040.00
63. T	otal	of all property on So	hedule A/B. Add line 55 + line 62			\$2319.30
			 			1

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 20 of 70

Fill in this information to identify your case:						
Debtor 1	Gregory First Name	L Middle Name	Ward Last Name			
Debtor 2 (Spouse, if fil	ing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Northern District of Illinois (State)						
Case number (If known)	r		(State)			

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt					
1. 2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description: Bank of America Line from Schedule A/B: 17	\$0.30	\$0.30 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			
	Brief description: bed Line from Schedule A/B: 06	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property coverd No Yes	3 years after that for ca					

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 21 of 70

ebtor 1 Gregory L First Name Mid		Ward Case number (if known)	
art 2: Additional Page	die Name	east Name	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Clothing Line from Schedule A/B: 11	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Brief description: Anticipated tax refund Line from Schedule A/B: 28	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: cellphone Line from Schedule A/B: 07	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Potential Worker's Compensation Claim - not current pursuing Line from Schedule A/B: 33	<u>Unknown</u>	\$0 100% of fair market value, up to any applicable statutory limit	820 ILCS 305/21

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 22 of 70

			· ·			
Fill in this info	ormation to identify your case	:				
Debtor 1	Gregory	L	Ward			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if fi	ling) First Name	Middle Name	Last Name			
United State	s Bankruptcy Court for the:	Northern	District of Illinois			
Cooo numba			(State)			
Case number (If known)						
	Form 106D			I	–	Check if this is a amended filing
Sched	lule D: Credit	ors Who Ha	ve Claims Secur	ed by Pro	perty	12/1
1. Do any No Yes Part 1: Lis	s. Fill in all of the information b	nis form to the court with yo below.	ur other schedules. You have nothing			Cohuman
for eac		editor has a particular claim	ed claim, list the creditor separately, list the other creditors in Part 2. As ng to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	C DUNDEE INC or's Name	Describe the property	that secures the claim:	\$5,710.00	\$769.00	\$4,941.00
Pund City Who D D D D Ar Ar	ee Illinois 60118 State ZIP Code owes the debt? Check one. ebtor 1 only ebtor 2 only t least one of the debtors and nother heck if this claim relates a community debt debt was 3/1/2014	Contingent Unliquidated Disputed Nature of lien. Check a An agreement you n car loan)	nade (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset)			
		vour entries in Column A	A on this page. Write that	\$5.710.00		

number here:

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 23 of 70

Fill i	n this inform	ation to identify your cas	e:					
Deb	tor 1	Gregory First Name	L Middle Name	Ward Last Name	_			
	tor 2 buse, if filing	First Name	Middle Name	Last Name	_			
Unit	ed States Ba	ankruptcy Court for the:	Northern	District of Illinois (State)	_			
	e number nown)			(Oldio)	_			
Off	icial F	orm 106E/F			<u> </u>	Cr	neck if this is ar	n amended filing
Sc	hedu	le E/F: Cre	ditors Who	Have Unsecu	red Claims			12/15
party 106A that a entricknow	to any exe /B) and on are listed in es in the bo /n).	cutory contracts or un Schedule G: Executor Schedule D: Creditor oxes on the left. Attach	expired leases that could y Contracts and Unexpire s Who Hold Claims Secu the Continuation Page t	ors with PRIORITY claims and I result in a claim. Also list exect ed Leases (Official Form 106G) ured by Property. If more space to this page. On the top of any	cutory contracts on <i>Sch</i> . Do not include any cre e is needed, copy the Pa	nedule A/B editors with art you nee	<i>: Property</i> (O h partially sec ed, fill it out, r	official Form cured claims number the
Part	1: List A	All of Your PRIORIT	TY Unsecured Claim	IS				
1.		editors have priority un o to Part 2.	secured claims against y	you?				
2.	listed, ident much as po Continuation	ify what type of claim it is ossible, list the claims in a on Page of Part 1. If more	s. If a claim has both priority alphabetical order accordin e than one creditor holds a	nore than one priority unsecured and nonpriority amounts, list that g to the creditor's name. If you ha particular claim, list the other cred for this form in the instruction book	claim here and show both we more than two priority ditors in Part 3.	n priority an	d nonpriority ar	mounts. As
						Total claim	Priority amount	Nonpriority amount

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 24 of 70

Debto	or 1 Gregory L War		
		Name	
Part 2	List All of Your NONPRIORITY Unsecured Claims	3	
3.	Do any creditors have nonpriority unsecured claims against you	1?	
1	No. You have nothing to report in this part. Submit this form to the		
	✓ Yes.	,	
		and an of the condition and a health condition if a condition has a condition	h
		order of the creditor who holds each claim. If a creditor has more t claim listed, identify what type of claim it is. Do not list claims already inc	
		s in Part 3.If you have more than four priority unsecured claims fill out t	
	Page of Part 2.	o in the driver in our trial to the priority directed dialine in our tr	no continuation
			Total claim
44	A/R CONCEPTS		
4.1	Nonpriority Creditor's Name	Last 4 digits of account number0786	\$442.00
	18-3 E DÚNDEE RD STE 330	When was the debt incurred?1/1/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	BARRINGTON Illinois 60010		
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	No	Collection; Collecting for	
		ORIGINAL CREDITOR: 04 CARPENTERSVILLE FIRE	
	Yes	Other. Specify DEPARTMEN	
4.2	ComEd	Lost 4 divite of apparent number	\$400.00
	Nonpriority Creditor's Name	Last 4 digits of account number	
	3 Lincoln Center Number Street	When was the debt incurred?n/a	
		As of the date you file, the claim is: Check all that apply.	
	Bankruptcy Section	Contingent	
	Oakbrook Terrace Illinois 60181	Unliquidated	
	Oakbrook Terrace Illinois 60181 City State Zip Code	Disputed	
	Who incurred the debt? Check one.		
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	불	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify Unsecured	
	Is the claim subject to offset?	Guior. Specify Guidence	
	✓ No		
	Yes		
4.3	CREDIT MANAGEMENT LP	Last 4 digits of account number 4051	\$448.00
	Nonpriority Creditor's Name 4200 INTERNATIONAL PKWY	When was the debt incurred? 9/1/2015	
	Number Street	when was the dept incurred:	
		As of the date you file, the claim is: Check all that apply.	
	CARROLLTON Texas 75007	Contingent	
	CARROLLTON Texas 75007 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	불	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR:	
	Yes	COMCAST CENTRAL Other. Specify <u>WAREHOUSE</u>	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 25 of 70

Debto	r 1 Gregory L	Ward Case number (if known)	
	First Name Middle Name	Last Name	
Part 2	Your NONPRIORITY Unsecured Claims - Con	itinuation Page	
	After listing any entries on this page, number them beginn	ning with 4.5, followed by 4.6, and so forth.	Total claim
4.4	DEPTEDNELNET Nonpriority Creditor's Name	Last 4 digits of account number 2959	\$3,000.00
	PO Box 740283 Number Street	When was the debt incurred? 6/1/2013	
		As of the date you file, the claim is: Check all that apply.	
	Atlanta Cannia 20274	Contingent	
	Atlanta Georgia 30374 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	✓ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No Yes	_	
4.5	DEPTEDNELNET	Look Admits of account number 2000	\$1,750.00
	Nonpriority Creditor's Name PO Box 740283	Last 4 digits of account number 2859 When was the debt incurred? 6/1/2013	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
	Atlanta Georgia 30374	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	Yes		
4.6	DRIVENOW	Last 4 digits of account number 9701	\$8,397.00
	Nonpriority Creditor's Name 777 Dundee Ave.	Last 4 digits of account number 9701 When was the debt incurred? 7/1/2012	<u> </u>
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
	Dundee Illinois 60118	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a community debt	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	✓ Other. Specify 37 Automobile	
	Yes		

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 26 of 70

Debto		Nard Case number (if known)	
	First Name Middle Name L	Last Name	
Part 2	Your NONPRIORITY Unsecured Claims - Continue	nuation Page	
	After listing any entries on this page, number them beginning		Total claim
4.7	FORESTRECVY Nonpriority Creditor's Name	Last 4 digits of account number0045	\$86.00
	655 Bent Ŕidge Ln	When was the debt incurred?5/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Parriantes Illinois C0040	Contingent	
	BarringtonIllinois60010CityStateZip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for	
	Yes	ORIGINAL CREDITOR: Other. Specify MEDICAL	
4.8	IDES Springfield	Last 4 digits of account number	\$1,500.00
	Nonpriority Creditor's Name PO Box 19286	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Benefit Repayments	Contingent	
	Springfield Illinois 62794	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Other. Specify Overpayment	
	Is the claim subject to offset?	<u> </u>	
	Yes		
4.9	MERCHANTS CREDIT GUIDE	Last 4 digits of account number 0844	\$234.00
	Nonpriority Creditor's Name 223 W JACKSON BLVD # 700	When was the debt incurred? 5/1/2013	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Chicago Winaia 00000	Contingent	
	ChicagoIllinois60606CityStateZip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for	
	Yes	ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 27 of 70

otor 1 Gregory First Name	L Middle Name	Ward Case number (if known) Last Name	
	Unsecured Claims - Cont		
		ning with 4.5, followed by 4.6, and so forth.	Total claim
		ining man no, renewed by no, and so to an	\$569.00
NORTHWEST COLLECTO Nonpriority Creditor's Name		Last 4 digits of account number 9717	\$569.00
<u>3601 ALGONQUIN RD STE</u>		When was the debt incurred? 8/1/2012	
Number Street		As of the date you file, the claim is: Check all that apply.	
-		Contingent	
	linois 60008		
MEADOWS City S	State Zip Code	Unliquidated	
Who incurred the debt?		Disputed	
✓ Debtor 1 only		Type of NONPRIORITY unsecured claim:	
Debtor 2 only		Student loans	
Debtor 1 and Debtor 2 of	only	Obligations arising out of a separation agreement or divorce	
At least one of the debto	•	that you did not report as priority claims	
H		Debts to pension or profit-sharing plans, and other similar	
_	lates to a community debt	debts 001 Collection; Collecting for	
Is the claim subject to off	set?	001 Collection; Collecting for ORIGINAL CREDITOR:	
✓ No		Other. Specify MEDICAL PAYMENT DATA	
Yes			
NORTHWEST COLLECTO		Last 4 digits of account number 2237	\$200.00
Nonpriority Creditor's Name 3601 ALGONQUIN RD STE			
Number Street	_ 23	When was the debt incurred? 7/1/2010	
		As of the date you file, the claim is: Check all that apply.	
POLLING II	Uingia 60009	Contingent	
ROLLING II MEADOWS	llinois 60008	Unliquidated	
- 7	State Zip Code	Disputed	
Who incurred the debt? Debtor 1 only	Check one.	Type of NONPRIORITY unsecured claim:	
		Student loans	
Debtor 2 only			
Debtor 1 and Debtor 2 of	only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
At least one of the debto	ors and another	Debts to pension or profit-sharing plans, and other similar	
Check if this claim rel	lates to a community debt	debts	
Is the claim subject to off	set?	✓ 001 Collection; Collecting for	
✓ No		ORIGINAL CREDITOR: HANOVER PARK PHOTO	
Yes		Other. Specify ENFORCEMENT	
Northwest Medicine			ΦΩ ΩΩ
Nonpriority Creditor's Name	 Э	Last 4 digits of account number	\$0.00
28155 Network Place		When was the debt incurred?n/a	
Number Street		As of the date you file, the claim is: Check all that apply.	
		Contingent	
O		Unliquidated	
	Ilinois 60673 State Zip Code	- 	
Who incurred the debt?		Disputed	
✓ Debtor 1 only		Type of NONPRIORITY unsecured claim:	
Debtor 2 only		Student loans	
Debtor 1 and Debtor 2 of	only	Obligations arising out of a separation agreement or divorce	
At least one of the debto	•	that you did not report as priority claims	
		Debts to pension or profit-sharing plans, and other similar	
	lates to a community debt	── debts ✓ Other. Specify Unsecured	
Is the claim subject to off	set?	Office Of	
✓ No			
Yes			

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 28 of 70

Debtor		Ward Case number (if known)	
		Last Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Conti	inuation Page	
	After listing any entries on this page, number them beginn	ning with 4.5, followed by 4.6, and so forth.	Total claim
4.13	ROCKFORD MER	— Last 4 digits of account number 5528	\$338.00
	Nonpriority Creditor's Name POB 5847	When was the debt incurred? 7/1/2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	ROCKFORD Illinois 61125	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	<u>'</u>	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR: Other. Specify MEDICAL	
	Yes	Other. Openity	
4.14	STANISCCONTR Nonpriority Creditor's Name	Last 4 digits of account number 76N1	\$414.00
	914 14TH ST POB 480	When was the debt incurred? 7/1/2013	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	MODESTO California 95353 City State Zip Code	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	··	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	Collection; Collecting for ORIGINAL CREDITOR:	
	Yes	Other. Specify MEDICAL	
4.15	STANISCCONTR	Last 4 digits of account number 39N1	\$337.00
	Nonpriority Creditor's Name 914 14TH ST POB 480		<u> </u>
	Number Street	When was the debt incurred? 3/1/2012	
		As of the date you file, the claim is: Check all that apply.	
	MODESTO California 95353	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	'	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? No	Collection; Collecting for	
		ORIGINAL CREDITOR: Other. Specify MEDICAL	
	Yes		

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 29 of 70

Debtor		ard Case number (if known)	
	First Name Middle Name La:	st Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Contin	uation Page	
	After listing any entries on this page, number them beginning	ng with 4.5, followed by 4.6, and so forth.	Total claim
4.16	STANISCCONTR Nonpriority Creditor's Name	Last 4 digits of account number08N1	\$243.00
	914 14TH ST POB 480	When was the debt incurred? 12/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	MODESTO California 95353 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Collection; Collecting for	
	✓ No ☐ Yes	ORIGINAL CREDITOR: Other. Specify MEDICAL	
4 4 7	STANISCCONTR		\$240.00
4.17	Nonpriority Creditor's Name	 Last 4 digits of account number08N1 	\$240.00
	914 14TH ST POB 480 Number Street	When was the debt incurred? 2/1/2011	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	MODERTO California 05252	Contingent	
	MODESTO California 95353 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 and Debtor 2 and c	Student loans	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	봄	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt Is the claim subject to offset?	debts	
	✓ No	Collection; Collecting for ORIGINAL CREDITOR:	
	Yes	Other. Specify MEDICAL	
4.18	STANISCCONTR	Last 4 digits of account number 35N1	\$234.00
	Nonpriority Creditor's Name 914 14TH ST POB 480	When was the debt incurred? 12/1/2012	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	MODESTO California 95353	Contingent Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR:	
	Yes	Other. Specify MEDICAL	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 30 of 70

Debtor			
		st Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Contin	uation Page	
	After listing any entries on this page, number them beginning	g with 4.5, followed by 4.6, and so forth.	Total claim
4.19	STANISCCONTR Nonpriority Creditor's Name	Last 4 digits of account number35N1	\$213.00
	914 14TH ST POB 480 Number Street	When was the debt incurred? 3/1/2011	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	MODESTO California 95353 City State Zip Code	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR: Other. Specify MEDICAL	
	☐ Yes	Outer. openity	
4.20	STANISCCONTR Nonpriority Creditor's Name	 Last 4 digits of account number 84N1 	\$84.00
	914 14TH ST POB 480	When was the debt incurred? 12/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	MODESTO California 95353 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Collection; Collecting for	
	Yes	ORIGINAL CREDITOR: Other. Specify MEDICAL	
4.21	STANISCCONTR		\$73.00
	Nonpriority Creditor's Name	- Last 4 digits of account number 80N1	Ψ7 0.00
	914 14TH ST POB 480 Number Street	When was the debt incurred? 1/1/2014	
	<u> </u>	As of the date you file, the claim is: Check all that apply.	
	MODESTO California 95353	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts Collection: Collecting for	
	✓ No	Collection; Collecting for ORIGINAL CREDITOR:	
	Yes	Other. Specify MEDICAL	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 31 of 70

Debtor			
	First Name Middle Name Last	Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Continu	ıation Page	
	After listing any entries on this page, number them beginning	y with 4.5, followed by 4.6, and so forth.	Total claim
4.22	STANISCCONTR Nonpriority Creditor's Name	Last 4 digits of account number 92N1	\$53.00
	914 14TH ST POB 480 Number Street	When was the debt incurred? 12/1/2013	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	MODESTO California 95353	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR:	
	Yes	Other. Specify MEDICAL	
4.23	UNIVERSITY OF PHOENIX	- Last 4 digits of account number 1280	\$915.00
	Nonpriority Creditor's Name 4615 E ELWOOD ST FL 3	When was the debt incurred? 6/1/2012	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	PHOENIX Arizona 85040 City State Zip Code	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts ✓ Other. Specify 001 InstallmentLoan	
	✓ No	V Ottor. opooliy	
	Yes		

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Mair Document Page 32 of 70

Ward Debtor 1 Gregory Case number (if known) Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$4,750.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. debts \$15,420.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$20,170.00 6j. Total. Add lines 6f through 6i. 6j.

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 33 of 70

Fill in this info	rmation to identify your cas	e:			
Debtor 1	Gregory	L	Ward		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	^{ng)} First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
		•	(State)		
Case number					
(If known)					
Official	Form 106G				Check if this is an amended filing
Schedu	ıle G: Execut	ory Contract	s and Unexpir	red Leases	12/15
space is need				are equally responsible for supplying corre this page. On the top of any additional pag	
1. Do you	have any executory	contracts or unexpi	red leases?		
✓ No. Ch	neck this box and file this fo	orm with the court with your o	other schedules. You have no	othing else to report on this form.	
Yes. F	ill in all of the information b	elow even if the contracts of	r leases are listed on <i>Schedu</i>	lule A/B: Property (Official Form 106A/B).	
				Then state what each contract or lease is for re examples of executory contracts and unexpired.	

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 34 of 70

Debtor 1 Debtor 2 (Spouse, if filing	Gregory First Name	: L Middle Name Middle Name	Ward Last Name		
Debtor 2 (Spouse, if filing	First Name		Last Name		
(Spouse, if filing					
) First Name	Middle Name			
United States Ba			Last Name		
	ankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)					
Official F	Form 106H				if this is led filing
	e H: Your Co	debtors			12/
I. Do you hav	ve any codebtors? (If yo	u are filing a joint case, do r	not list either spouse as a	codebtor.)	
Idaho, Louis No. G	siana, Nevada, New Mexic o to line 3.	ved in a community prop o, Puerto Rico, Texas, Was ouse, or legal equivalent live	hington, and Wisconsin.)	Community property states and territories include Arizona, Cal	ifornia,
✓ N	Ю				
	es. In which community st	ate or territory did you live?	Fil	I in the name and current address of that person.	
		mar anauga ar lagal aguir	alent		
	Name of your spouse, for	mer spouse, or legal equiva	aloni		
	Name of your spouse, for Number Street	mer spouse, or legal equiva			

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 35 of 70

Debtor 1 Gregory L Ward First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number (If known) Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is livi with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Crystal Lake Illinois 60014	Fill in this information to iden	tify your case:					
First Name		l	Ward				
Case number		Middle Name)	_		
United States Bankruptcy Court for the: Northern						Check if this is:	
Case number (If known) Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are aqually responsible for supplying correct information. If you are married and not filing jointly, and your spouse is livi with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not not not upour spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment If you have more than one job, attach a separate page with information about additional employers. Employers tattus Employed Debtor 1 Debtor 2	(Spouse, if filing) First Name	Middle Name	Last Name)	_	An amended filing	
Case number (If known) MM / DD / YYYY	United States Bankruptcy Court for the	e: Northern	_		_	A supplement showing post-petition chapte expenses as of the following date:	
Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is livi with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not not not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Express Employment Professionals Employer's address Employer's address Employer's address Employer's address Employer's reset Number Street			(State		_	MM / DD / YYYY	
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is livi with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not not not not information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's address Employer's address Employer's address Employer's address Crystal Lake Illinois 60014	Official Form 106L					, 22 ,	
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is livi with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Crystal Lake Illinois 60014		ncome				1:	
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employment status If pour have more than one job, Not Employed Not Employe	additional pages, write your	name and case numbe					
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Crystal Lake Illinois 60014 Employed Employed Not			Debtor 1			Debtor 2	
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Crystal Lake Illinois 60014	information.	Employment status	✓ Employed			Fmployed	
information about additional employers. Employer's name Employer's name Employer's address Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Occupation Employer's name Express Employment Professionals Express Employment Professionals Express Employment Professionals Employer's address Number Street Crystal Lake Illinois 60014	job,						
Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address 580 E Terra Cotta Ave Number Street Number Street Crystal Lake Illinois 60014		0	Temp Employe	е			
or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Number Street Number Street Number Street Number Street Number Street Number Street	employers.	Employer's name	Express Emplo	Express Employment Professionals			
or Self-employed work. Occupation may include student or homemaker, if it applies. Number Street Number Street Number Street Number Street Number Street	Include part time, seasonal,	, Fmnlover's address					
student or homemaker, if it applies. Crystal Lake Illinois 60014		Limpioyer s address				Number Street	
Crystal Lake IIIInois 60014	•						
,	or homemaker, if it applies		Crystal Lake City	Illinois State	60014 Zip Code	City State Zip Code	
How long employed there?							
L Z LIST DOUBLY GLOSS MADES. SALARY AND COMMISSIONS (DETOTE All DAVIOLE 2 91 000 52					ψ1,505.03		
 List monthly gross wages, salary, and commissions (before all payroll 2. \$1,909.53 deductions.) If not paid monthly, calculate what the monthly wage would be. 	3. Estimate and list monthly ov	rertime pay.	3.		+ \$0.00		

\$1,909.53

4. Calculate gross income. Add line 2 + line 3.

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 36 of 70

Debto	or 1 Gregory	L Middle Nome	Ward	Case number	(if known)			
	First Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse			
Co	py line 4 here		→ 4.	\$1,909.53				
5. Lis	t all payroll deductions:							
5a	. Tax, Medicare, and Social S	ecurity deductions	5a.	\$409.07				
5b	. Mandatory contributions fo	r retirement plans	5b.	\$0.00				
5c	. Voluntary contributions for	retirement plans	5c.	\$0.00				
5d	. Required repayments of ret							
5e	. Insurance							
5f.	Domestic support obligatio							
5g	. Union dues		5g.	\$0.00				
5h	. Other deductions. Specify: _		_ 5h. +	\$0.00 +	·			
6. Ad +5h.	d the payroll deductions. Add	I lines 5a + 5b + 5c + 5d + 5e +5f	+ 5g 6.	\$409.07				
7. C al	Iculate total monthly take-ho	me pay. Subtract line 6 from line	4. 7. <u>.</u>	\$1,500.46				
	t all other income regularly re							
8a	Net income from rental pro business, profession, or far	perty and from operating a modern operating a comperty and business showing grow	ee.					
		iry business expenses, and the tot		\$0.00				
8b	. Interest and dividends		8b.	\$0.00	-			
8c	dependent regularly receive		· a					
	divorce settlement, and proper	•	8c.	\$0.00				
	l. Unemployment compensat	ion	8d	\$0.00				
	. Social Security		8e.	\$0.00	-			
8f.		e value (if known) of any non-cash ch as food stamps (benefits under						
	Specify: Food Assistance Prog	grams Income	8f.	\$194.00				
8g	. Pension or retirement inco	me	8g.	\$0.00				
8h	. Other monthly income. Spe	cify:	8h. +	\$0.00 +				
9. Ad								
10. Ca Ac	alculate monthly income. Add dd the entries in line 10 for Debt	line 7 + line 9. or 1 and Debtor 2 or non-filing sp	10	\$1,694.46		= \$1,694.46		
 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 								
Sp	pecify:					11. + \$0.00		
12. A c	12. \$1,694.46							
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies								
13. D c	No.	lecrease within the year after yo	ou file this form?			monthly income		
L	Yes. Explain:							

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 37 of 70

Fill in this infor	mation to identify your ca	ase:				
Debtor 1	Gregory	L	Ward			
	First Name	Middle Name	Last Name			
Debtor 2	, —			Check if this is:		
(Spouse, if filing	^(g) First Name	Middle Name	Last Name	An amended filing	3	
United States	Bankruptcy Court for the:	Northern	District of Illinois	A supplement sho	owing post-petition chapter	r 13
Case number			(State)	expenses as of th	e following date:	
(If known)			_	MM / DD / YYYY	,	
Official	Form 106J					
	le J: Your E	xpenses				12/15
		-	e filing together, both are equally r	osnonsible for supply	ving correct	
information. If			form. On the top of any additional			
	cribe Your House	hold				
1. Is this a joi		noid				
	o to line 2					
Yes. D	oes Debtor 2 live in a	separate household?				
	No					
	Yes. Debtor 2 must f	file Official Forms 106J-2, <i>Expens</i>	ses for Separate Household of Debto	r2.		
2. Do you hav		No				
Do not list D	Debtor 1 and	Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does dependent live	
Debtor 2.		each dependent	Debtor 1 or Debtor 2	age	with you?	
	penses include of people other	No				
than		Yes				
yourself an dependent						
Part 2: Esti	mate Your Ongoin	g Monthly Expenses				
_	of a date after the ban		ou are using this form as a suppl plemental Schedule J, check the	•	-	
		-cash government assistance			v	
		l it on Schedule I: Your Income	,		Your expen	ses
	or home ownership ex or the ground or lot. 4.	xpenses for your residence. In	clude first mortgage payments and		4.	\$275.00
If not inc	luded in line 4:					
4a. Real e	estate taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or ren	ter's insurance			4b.	\$0.00
4c. Home	maintenance, repair, and	l upkeep expenses			4c.	\$0.00
4d. Home	owner's association or co	ondominium dues			4d.	\$0.00

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 38 of 70

Ward

Debtor 1

Gregory Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$245.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$300.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$200.00 10. Personal care products and services 10. \$100.00 11. Medical and dental expenses \$100.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$275.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$100.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$100.00 15b 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 39 of 70

Debtor 1	Gregory	L	Ward	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22. Calcu	late your monthly expenses.			\$1,695.00		
22a. <i>F</i>	add lines 4 through 21.					\$0.00
22b. C	Copy line 22 (monthly expenses		\$1,695.00			
22c. A	dd line 22a and 22b. The result	is your monthly expens	ses.		22.	
23.Calcu	late your monthly net income).				
23a. C	Copy line 12 (your combined mor	nthly income) from Sch	edule I.		23a	\$1,694.46
23b. C	Copy your monthly expenses from		23b	\$1,695.00		
23c. S	Subtract your monthly expenses f	rom your monthly incor	ne.			(\$0.54)
	The result is your monthly net in	come.			23c	
24. Do y o	ou expect an increase or decr	ease in your expense	es within the year after you	file this form?		
		: f				
	example, do you expect to finish p gage payment to increase or de	, , , ,	, , ,	•		
	No					
	/					
_	⁄es					
	Explain here:					
	debtor lives with family	y				

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 40 of 70

Fill in this information to identify your case:								
Debtor 1	Gregory First Name	L Middle Name	Ward Last Name					
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name					
United States B	ankruptcy Court for the:	Northern	District of Illinois(State)					
Case number (If known)			(State)					

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below									
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?									
	✓ No									
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).								
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and								
•	·	*								
X	/s/ Gregory Ward Signature of Debtor 1	Signature of Debtor 2								
	Signature of Debior 1	Signature of Debiol 2								
	Date 10/27/2016	Date								
	MM/DD/YYYY	MM/DD/YYYY								

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 41 of 70

Fill in this inf	formation to identify your cas	se:							
Debtor 1	Gregory	L	Ward						
	First Name	Middle Name	Last Nar	me					
Debtor 2									
(Spouse, if f	iling) First Name	Middle Name	Last Nar	ne					
United State	es Bankruptcy Court for the:	Northern	District of Illino	ois					
0			(Sta	ite)					
Case number (If known)	eı								
Officia	l Form 107					Check if this is amended filing			
Statem	nent of Financ	ial Affairs fo	r Individu	als Filing for Ba	ankruptcy	12/			
-	-			er, both are equally respons al pages, write your name an					
	ive Details About You		d Where You Li	ved Before					
1. What	t is your current marital st	atus?							
	Married Not married								
2. Durir	During the last 3 years, have you lived anywhere other than where you live now?								
I	No								
	Yes. List all of the places you	lived in the last 3 years. De	o not include where y	you live now.					
ī	Debtor 1:	Date ther	es Debtor 1 lived	Debtor 2:		Dates Debtor 2 lived there			
				Same as Debtor 1		Same as Debtor 1			
<u>-</u> 1	Number Street	Fror	m	Number Street		From			
_		То				To			
Ō	City State	Zip Code		City State	Zip Code				
				Same as Debtor 1		Same as Debtor 1			
1	Number Street	Fror	n	Number Street		From			
		т-				To			

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

City

Zip Code

State

✓ No

City

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Zip Code

State

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 42 of 70

Debtor 1		Ward e Name Last Na		number (if known)	
art 2:	Explain the Sources of Your		u		
Did Fill	I you have any income from employn in the total amount of income you receiv ivities. If you are filing a joint case and yo No	nent or from operating a be ed from all jobs and all busin	nesses, including part-time		years?
✓	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until he date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$16530.00		
	For last calendar year: January 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$19000.00	Wages, commissions, bonuses, tips Operating a business	
	For the calendar year before that: January 1 to December 31, 2014) YYYYY	Wages, commissions, bonuses, tips Operating a business	\$17500.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
Inclu bene case	you receive any other income during ude income regardless of whether that in efit payments; pensions; rental income; i e and you have income that you received each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples onterest; dividends; money co together, list it only once und	of other income are alimony; challected from lawsuits; royalties ler Debtor 1.	; and gambling and lottery win	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Estimated LINK benefits	\$388.00		
	For last calendar year: (January 1 to December 31, 2015) YYYY				
	For the calendar year before that: (January 1 to December 31, 2014) YYYY				

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 43 of 70

ebtor 1		regory rst Name		L Middle Name	Ward Last Name	Case numb	per (if known)			
nr4 2 -			Paymonte \		efore You Filed for I	Rankruptov				
art 3:	LI	st Certain r	ayınıenıs	Tou Made De	elore lou Fileu loi i	Банкгирісу				
Are	eith	er Debtor 1's	or Debtor 2's	s debts primari	ily consumer debts?					
	No.			otor 2 has prim mily, or househol		consumer debts are defined	in 11 U.S.C. § 101(8) as "incu	rred by an individual		
		During the 90	days before	you filed for bank	kruptcy, did you pay any cre	editor a total of \$6,425* or mo	ore?			
	No. Go to line 7.									
		Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.								
* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.										
✓	Yes	. Debtor 1 or	Debtor 2 or I	both have prim	narily consumer debts.					
		During the 90	days before y	you filed for bank	kruptcy, did you pay any cre	editor a total of \$600 or more	?			
		✓ No. Go t	o line 7.							
		tha	at creditor. Do	not include pay		more and the total amount y t obligations, such as child s s bankruptcy case.				
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
	Cre	editor's Name					·	Mortgage		
	Nu	mber Street						Car Credit card Loan repayment		
								Suppliers or		
	Cit	у	State	Zip Code				vendors Other		
	Cre	editor's Name						☐ Mortgage ☐ Car		
	Nu	mber Street						Credit card		
								Loan repayment		
	Cit	y	State	Zip Code				Suppliers or vendors		
								Other		
	Cre	editor's Name						Mortgage Car		
	Nu	mber Street						Credit card		
								Loan repayment		
	Cit	y	State	Zip Code				Suppliers or vendors		
								Other		

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 44 of 70

Debtor 1	Gregory First Name	L Middle Name	War Last	rd Name	Case number (i	f known)
Insi cor age	iders include your relati porations of which you	u filed for bankruptcy, did ives; any general partners; are an officer, director, per business you operate as a alimony.	relatives of any goson in control, or o	eneral partners; par owner of 20% or mo	tnerships of which y ore of their voting sec	ou are a general partner; curities; and any managing
✓	No Yes. List all payments	s to an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name					
	Number Street					
	City Sta	ate Zip Code				
	Insider's Name					
	Number Street					
	City Sta	ate Zip Code				
	hin 1 year before youider?	u filed for bankruptcy, dic	l you make any _l	payments or trans	fer any property o	n account of a debt that benefited an
Incl	ude payments on debts	s guaranteed or cosigned by	/ an insider.			
		that benefited an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
						Include creditor's name
	Insider's Name					
	Number Street					
	City Sta	ate Zip Code				
	Insider's Name					
	Number Street					
	City Sta	ate Zip Code				
	Old	Zip 0000				

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 45 of 70

Deb	tor 1	Gregory First Name		L Middle Name	Ward Last Name		Case number (if	known)	
art	4:		Actions, Ro		s, and Foreclosure	es			
).	With List a	in 1 year before y	ou filed for ba	nkruptcy, were	you a party in any laws	uit, court actio			ng? r custody modifications, and
	_	No Yes. Fill in the deta	ils.						
				Nat	ure of the case	Court or	agency		Status of the case
		Case title				Court Nan	ne		Pending On appeal
		Case number				NumberSt			On appeal Concluded
		0				City	State	Zip Code	
		Case title				Occupt No.			Pending
		Case number				Court Nan	ne		On appeal
						NumberSt	reet		Concluded
						City	State	Zip Code	
	✓	No. Go to line 11. Yes. Fill in the info	rmation below.		Describe the prop	erty		Date	Value of the
		CNAC DUNDEE	: INC		2004 Chevy Impala	2004 Chevy Impala 09/201 Explain what happened			property \$0
		Creditor's Name							
		750 Dundee Ave Number Street			Explain what happ				
					✓ Property was re				
					Property was fo				
		Dundee City	Illinois State	60118 Zip Code	Property was g	amisned. ttached, seized,	or levied		
					Describe the prop		<u> </u>	Date	Value of the property
		Creditor's Name			Explain what happ	pened			
		Number Street			-				
					Property was re	epossessed.			
					Property was fo				
		-	•		Property was g				
		City	State	Zip Code	Property was a	ttached, seized,	or levied.		

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 46 of 70

Debt	or 1	Gregory First Name	L Middle Name	Ward Last Name	Case number (if known)		
11.		hin 90 days before you filed fo ounts or refuse to make a payı			ank or financial institution, s	set off any amour	nts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account no	umber: XXXX-		
		City State	Zip Code				
		hin 1 year before you filed for ointed receiver, a custodian, o		of your property in the p	oossession of an assignee f	or the benefit of o	creditors, a court-
	✓	No Yes					
Part		List Certain Gifts and C					
13.	Wı			ou give any gifts with a to	otal value of more than \$600	per person?	
		Yes. Fill in the details for each Gifts with a total value of mo per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the	Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave the	Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 47 of 70

Deb	otor 1	Gregory First Name		L Middle Name	Ward Last Name	Case number (if known)		
14.	Wit	hin 2 years hefore	vou filed for	hankruntev did v	ou give any gifts or contributi	ions with a total value of	more than \$600 t	o any charity?
14.	VII	No	you meu ioi	bankiupicy, did y	ou give any gins or contributi	ons with a total value of	more man \$000 i	o any chanty:
	Ħ	Yes. Fill in the detai	ls for each g	ift or contribution.				
		Gifts or contribut that total more th	ions to cha		Describe what you contrib	uted	Date you contributed	Value
		Charity's Name						
		Number Street						
		City	State	Zip Code				
Part	t 6:	List Certain Lo	sses					
	gan	No Yes. Fill in the detail Describe the prophow the loss occur	erty you lo	st and	Describe any insurance co Include the amount that insur- pending insurance claims on	ance has paid. List	Date of your loss	Value of property lost
					A/B: Property.			
	abo	ut seeking bankrup	otcy or prep ankruptcy pet	aring a bankruptcy	edit counseling agencies for ser	vices required in your bank	ruptcy.	
					Description and value of a transferred	ny property	Date payment or transfer was made	Amount of payment
		Semrad Law Firm			Attorney's Fee - 0.00		10/27/2016	\$0.00
		Person Who Was P 10 N. Martingale R						
		Number Street		-				
		Suite 400						
		Schaumburg	Illinois	60173				
		City	State	Zip Code				
		Email or website ac None						
		Person Who Made	the Payment	, if Not You				
		Person Who Was P	aid					
		Number Street						
		City	Ctot-	Zio O = dr				
		City	State	Zip Code				
		Email or website ac	ddress					
		Person Who Made	the Payment	, if Not You				

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 48 of 70

Deb	tor 1	Gregory	L	Ward	Case number (if known)	
		First Name	Middle Name	Last Name		
17.	help	hin 1 year before you filed for you deal with your creditor not include any payment or tran No Yes. Fill in the details.	s or to make payment	s to your creditors?	our behalf pay or transfer any property to ar	nyone who promised to
	ш	res. Fill in the details.				
				Description and value of a transferred	any property Date payment or transfer was made	Amount of payment
		Person Who Was Paid				
		Number Street				
		City State	Zip Code			
		Oily State	Zip Oodc			
	Inclu	ordinary course of your bus ude both outright transfers and sfers that you have already liste No Yes. Fill in the details.	transfers made as secu		security interest or mortgage on your property)	. Do not include gifts and
				Description and value of a property transferred	any Describe any property or payments received or debts p in exchange	Date transfer was made
		Person Who Received Trans	fer			
		Number Street				
		City State Person's relationship to you	Zip Code			
		Person Who Received Trans	fer			
		Number Street				
		City State Person's relationship to you	Zip Code			
19.		hin 10 years before you filed ese are often called asset-prote		ou transfer any property to a	a self-settled trust or similar device of which	າ you are a beneficiary?
		No Yes. Fill in the details.				
	_	33.		Description and value of	f the property transferred	Date transfer was made
		Name of trust				

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 49 of 70

Debt	or 1	Gregory First Name	L Middle Name	Ward Last Name	Case	number (if known)		
Part	Ω-	List Certain Financial <i>A</i>			it Royas and	Storage Units		
20.	With mov Inclu	nin 1 year before you filed fo ved, or transferred? Ide checking, savings, money n	r bankruptcy, wer	e any financial accounts o	r instruments he	eld in your name, or fo		
	✓ Coob	peratives, associations, and oth No Yes. Fill in the details.	er financial instituti	cons. Last 4 digits of account	nt Type of	account or	Date	Last balance
				number	instrum	ent	account was closed, sold, moved, or transferred	before closing or transfer
		BMO Harris Bank Person Who Was Paid		XXXX-0000	✓ Che Savi	cking ings	07/2016	\$ -15.00
		Number Street				ey market kerage er		
	-	City State	Zip Code	VVVV		aliin a		
		Person Who Was Paid		XXXX-	Savi	_		
		Number Street			Brok	ey market kerage		
		City State	Zip Code		Othe	er		
	othe	ou now have, or did you haver valuables? No Yes. Fill in the details.	ve within 1 year b	efore you filed for bankrup Who else had access to		Describe the conte		Do you still have it?
		Name of Financial Institution		Name				No
		Number Street		Number Street				Yes
				City State	Zip Code			
		City State	Zip Code					
22.		e you stored property in a st No Yes. Fill in the details.	orage unit or plac	ce other than your home w	ithin 1 year befo	re you filed for bankr	uptcy?	
	ш	res. I ili ili the details.		Who else had access to	it?	Describe the conte	nts	Do you still have it?
		Name of Storage Facility		Name				☐ No ☐ Yes
		Number Street		Number Street				
		City State	Zip Code	City State	Zip Code			

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 50 of 70

rt 9:	First Name Middle Name	Last Name			
't 9:	l., ., 5				
	Identify Property You Hold or Con	trol for Someone Else			
Do	you hold or control any property that some	eone else owns? Include any p	operty you be	orrowed from, are storing for, or hold i	n trust for
	meone.				
I.	l No				
È	Yes. Fill in the details.				
	•	Where is the property?		Describe the contents	Value
	Owner's Name	Number Street			
	New Long Office of				
	Number Street				
		City State	Zip Code		
		-	2.p 0000		
	City State Zip Code				
t 10	Give Details About Environmenta	I Information			
II					
tne	purpose of Part 10, the following definitions app	ıy:			
	Environmental law means any federal, state, or	_	• .		
	hazardous or toxic substances, wastes, or mate including statutes or regulations controlling the				
	Site means any location, facility, or property as do or used to own, operate, or utilize it, including d	•	v, whether you	now own, operate, or utilize it	
	Hazardous material means anything an environr toxic substance, hazardous material, pollutant, c		waste, hazardo	ous substance,	
	toxic substance, nazardous material, polititant, c	ontaminant, or similar term.			
port	all notices, releases, and proceedings that you k	now about, regardless of when the	ey occurred.		
На			liablaalan a	wiw violation of an auvinonmontal lavo	
	s any governmental unit notified you that y	ou may be liable or potentially	liable under o	r in violation of an environmental law?	
✓	No	ou may be liable or potentially	liable under o	r in violation of an environmental law?	
✓	•	ou may be liable or potentially	liable under o		
✓	No	ou may be liable or potentially Governmental unit	liable under o	or in violation of an environmental law? Environmental law, if you know it	Date of
<u>~</u>	No		liable under o		
	No	Governmental unit	liable under o		Date of
_	No Yes. Fill in the details. Name of site	Governmental unit	liable under o		Date of
	No Yes. Fill in the details.	Governmental unit	liable under o		Date of
	No Yes. Fill in the details. Name of site	Governmental unit Governmental unit Number Street			Date of
	No Yes. Fill in the details. Name of site	Governmental unit	Zip Code		Date of
	No Yes. Fill in the details. Name of site	Governmental unit Governmental unit Number Street			Date of
	No Yes. Fill in the details. Name of site Number Street City State Zip Code	Governmental unit Governmental unit Number Street City State	Zip Code		Date of
Ha	No Yes. Fill in the details. Name of site Number Street	Governmental unit Governmental unit Number Street City State	Zip Code		Date of
Ha	No Yes. Fill in the details. Name of site Number Street City State Zip Code Ive you notified any governmental unit of an	Governmental unit Governmental unit Number Street City State	Zip Code		Date of
Ha V	No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of an	Governmental unit Governmental unit Number Street City State	Zip Code		Date of
Ha	No Yes. Fill in the details. Name of site Number Street City State Zip Code Ive you notified any governmental unit of an	Governmental unit Governmental unit Number Street City State	Zip Code		Date of notice
Ha	No Yes. Fill in the details. Name of site Number Street City State Zip Code Ive you notified any governmental unit of an	Governmental unit Governmental unit Number Street City State The state of the s	Zip Code	Environmental law, if you know it	Date of notice
Ha	No Yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of art No Yes. Fill in the details.	Governmental unit Governmental unit Number Street City State The prelease of hazardous material and the prelease of hazardous mater	Zip Code	Environmental law, if you know it	Date of notice
Ha	No Yes. Fill in the details. Name of site Number Street City State Zip Code Ive you notified any governmental unit of an	Governmental unit Governmental unit Number Street City State The state of the s	Zip Code	Environmental law, if you know it	Date of notice
Ha V	No Yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of art No Yes. Fill in the details.	Governmental unit Governmental unit Number Street City State The prelease of hazardous material and the prelease of hazardous mater	Zip Code	Environmental law, if you know it	Date of notice
Ha	No Yes. Fill in the details. Name of site Number Street City State Zip Code In the details any governmental unit of arm of site No Yes. Fill in the details.	Governmental unit Governmental unit Number Street City State Ay release of hazardous material Governmental unit Governmental unit Number Street	Zip Code	Environmental law, if you know it	Date of notice
Ha V	No Yes. Fill in the details. Name of site Number Street City State Zip Code In the details any governmental unit of arm of site No Yes. Fill in the details.	Governmental unit Governmental unit Number Street City State Overnmental unit Governmental unit	Zip Code	Environmental law, if you know it	Date of notice
Ha 🗹	No Yes. Fill in the details. Name of site Number Street City State Zip Code In the details any governmental unit of arm of site No Yes. Fill in the details.	Governmental unit Governmental unit Number Street City State Ay release of hazardous material Governmental unit Governmental unit Number Street	Zip Code	Environmental law, if you know it	Date of notice

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 51 of 70

Deb	tor 1	Gregory		L	Ward	Case	number (if known)	
		First Name		Middle Name	Last Name			
20	Have	b.o nout.	. in any iradia	sial av administr	ativa proposalina under		al law 2 la alvida actilomento and andone	
26.	пач	e you been a party	in any judio	al or administra	ative proceeding under	any environment	al law? Include settlements and order	S.
	✓	No						
	П	Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
					Court of agency		Nature of the case	case
		Case title						ouse
		Case title						Pending
					Court Name	_		
								On appeal
		Case number			Number Street			Concluded
								Contadada
					City State	Zip Code		
		D.(-! - A	L (V	. D		B!		
Part	111:	Give Details A	bout Your	Business or	Connections to An	y Business		
07	187:41	4	(! f		l	h a a a a £ tha £		-0
27.	vviti	nin 4 years before	you filed for	bankruptcy, did	i you own a business or	nave any of the fo	ollowing connections to any business	5?
		A sole propriet	or or self-emi	oloved in a trade	profession, or other activit	v either full-time o	r part-time	
				· -			r part time	
				ty company (LLC	;) or limited liability partners	snip (LLP)		
		A partner in a						
		An officer, dire	ctor, or mana	ging executive of	a corporation			
		An owner of at	least 5% of t	he voting or equit	y securities of a corporatio	n		
	lacksquare	No. None of the abo						
	Ш	Yes. Check all that a	apply above a	and fill in the detail	ls below for each business			
					Describe the natu	re of the busines	ss Employer Identification r	number Do not
							include Social Security n	umber or ITIN.
							EIN:	
		Business Name					Eliv.	
		Number Street					Dates business existed	
					Name of account	ant or bookkeepe	er	
		City	State	Zip Code			From To	
		J.,		p				
					Describe the natu	ire of the busines		
							include Social Security n	umber or ITIN.
							EIN:	
		Business Name						
		Number Street					Dates business existed	
					Name of account	ant or bookkeepe	er	
		City	State	Zip Code	_		From To	
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					Describe the natu	re of the busines	ss Employer Identification r	number Do not
							include Social Security n	
							EIN:	
		Business Name			_		EIN:	
		Number Street			_		Dates business existed	
		MULLINGI SUEEL			Name of account	ant or bookkeepe		
					_	•		
		City	State	Zip Code			From To	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 52 of 70

Debto				L	Ward	Case number (if known)
	First N	lame		Middle Name	Last Name	
	veditors No	, or other part	ties.	oankruptcy, did yc	u give a financial stateme	nt to anyone about your business? Include all financial institutions,
L	Yes.	Fill in the detail	s below.			
					Date issued	
	Ne				MM/DD/YYYY	
	Nar	ne			WWW/DD/TTTT	
	Nur	nber Street			_	
	City	1	State	Zip Code	_	
Part 1	0:-	n Below				
tr	ue and c	orrect. I under y case can res	rstand that m	naking a false stat	ement, concealing proper	nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
			re of Debtor 1			Signature of Debtor 2
						Date
		Date 1	0/27/2016			
Di	id you at	tach addition	al pages to Y	our Statement of	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
J	No					
Ē	Yes					
Di	id you pa	y or agree to	pay someon	e who is not an at	torney to help you fill out b	pankruptcy forms?
Ī✓	N o					
Ē	Yes. N	ame of person				Attach the Bankruptcy Petition Preparer's Notice,
						Declaration and Signature (Official Form 110)

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 53 of 70

Fill in this information to identify your case:				
Debtor 1	Gregory	L	Ward	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	g) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois	
			(State)	
Case number (If known)				

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditor

1.	For any creditors that you listed in Part 1 of <i>Schedule D: Creditors V</i> information below.	Vho Have Claims Secured by Property (Official For	m 106D), fill in the
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	Creditor's name: CNAC DUNDEE INC Description of property securing debt: 041 Automobile	✓ Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 54 of 70

Debtor	Gregory	L	Ward	Case number (if	
1	First Name	Middle Name	Last Name	known)	
				Part 2:	
	r Unexpired Personal Pr				
				racts and Unexpired Leases (Offici in effect; the lease period has not	
	pired personal property lease				
D				MPH dis Issas Is	
Des	cribe your unexpired personal	property leases		Will the lease b	assumed?
Less	or's name:			☐ No	
				Yes	
	cription of leased				
prop	erty:				
Loo	or'o nomo:			☐ No	
Less	or's name:			Yes	
Des	cription of leased				
prop	erty:				
				□ No	
Less	or's name:			Yes	
Des	cription of leased				
prop					
				□ No	
Less	or's name:			Yes	
Doc	cription of leased				
prop					
Less	or's name:			∐ No □ Yes	
Des prop	cription of leased erty:				
	•				
Less	or's name:			∐ No	
				Yes	
Des prop	cription of leased				
P. 0P					
Less	or's name:			☐ No	
				Yes	
	cription of leased				
prop	erty.				
Part 3:	Sign Below				
		hat I have indicated my in	stantian about any proper	u of my actata that accurac a daht	and any paraonal
	r penaity of perjury, I declare to erty that is subject to an unexp		пенион арош ану ргореп	y of my estate that secures a debt	and any personal
4 =			4		
	s/ Gregory Ward		Signatura	of Dobtor 1	
Si	gnature of Debtor 1		Signature	of Debtor 1	
Da	te 10/27/2016		Date	1/22 2000	
	MM/DD/YYYY		M	N/DD/YYYY	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 55 of 70

B 203 (12/94)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Gregory L Ward	Case No.	
_	Debtor		(If known)
		Chapter	Chapter 7
	DISCLOSURE OF COMPENSAT	ION OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(I that compensation paid to me within one year before the services rendered or to be rendered on behalf of the deb is as follows:	filing of the petition in bankruptcy, or ag	reed to be paid to me, for
	For legal services, I have agreed to accept		\$1,425.00
	Prior to the filing of this statement I have received		\$0.00
	Balance Due		\$1,425.00
2.	The source of the compensation paid to me was:		-
	Debtor Other (sp	pecify)	
3.	The source of the compensation paid to me is:		
	Debtor Other (sp	pecify)	
4.	I have not agreed to share the above-disclosed compmembers and associates of my law firm.	pensation with any other person unless t	they are
	I have agreed to share the above-disclosed compens members or associates of my law firm. A copy of the the people sharing in the compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to re a. Analysis of the debtor's financial situation, and rer bankruptcy;		
	b. Preparation and filing of any petition, schedules,	statements of affairs and plan which ma	y be required;
	c. Representation of the debtor at the meeting of cre	editors and confirmation hearing, and any	y adjourned hearings thereof;
6.	By agreement with the debtor(s), the above-disclosed fee	e does not include the following services	:
	CERT	TIFICATION	
	I certify that the foregoing is a complete statement of any ne debtor(s) in this bankruptcy proceedings.	agreement or arrangement for payment	to me for representation
	10/27/2016	/s/ Yisroel Y Moskovits	
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	_

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 60 of 70

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Ward, Gregory L	Case No		
	Debtor(s)	0000 110.		
		Chapter.	Chapter7	
	VERIFICATION	OF CREDITOR MAT	RIX	
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their know			
Date:	10/27/2016	/s/ Ward, Grego	ov I	
	1021/2010	Ward, Gregory	·	
		Signature of De	otor	

DRIVENOW 777 Dundee Ave. Dundee , IL 60118

CNAC DUNDEE INC 750 Dundee Ave Dundee , IL 60118

DEPTEDNELNET PO Box 740283 Atlanta, GA 30374

DEPTEDNELNET PO Box 740283 Atlanta , GA 30374

UNIVERSITY OF PHOENIX 4615 E ELWOOD ST FL 3 PHOENIX , AZ 85040

NORTHWEST COLLECTORS 3601 ALGONQUIN RD STE 23 ROLLING MEADOWS, IL 60008

CREDIT MANAGEMENT LP 4200 INTERNATIONAL PKWY CARROLLTON, TX 75007

A/R CONCEPTS 18-3 E DUNDEE RD STE 330 BARRINGTON , IL 60010

STANISCCONTR 914 14TH ST POB 480 MODESTO , CA 95353

ROCKFORD MER POB 5847 ROCKFORD , IL 61125

STANISCCONTR 914 14TH ST POB 480 MODESTO, CA 95353 STANISCCONTR 914 14TH ST POB 480 MODESTO, CA 95353

STANISCCONTR 914 14TH ST POB 480 MODESTO , CA 95353

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

STANISCCONTR 914 14TH ST POB 480 MODESTO, CA 95353

STANISCCONTR 914 14TH ST POB 480 MODESTO , CA 95353

NORTHWEST COLLECTORS 3601 ALGONQUIN RD STE 23 ROLLING MEADOWS, IL 60008

FORESTRECVY 655 Bent Ridge Ln Barrington , IL 60010

STANISCCONTR 914 14TH ST POB 480 MODESTO , CA 95353

STANISCCONTR 914 14TH ST POB 480 MODESTO , CA 95353

STANISCCONTR 914 14TH ST POB 480 MODESTO , CA 95353

IDES Springfield PO Box 19286 Benefit Repayments Springfield , IL 62794 ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park , IL 60181

Northwest Medicine 28155 Network Place Chicago , IL 60673

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do he reby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also un derstand that The Semrad Law Firm, LLC may incur costs for such it ems as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$ 1425.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and at tendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two opti ons regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filling of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filling of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filling of my case. I have been advised that I have a right to consult other counsel before I sign

Debtor Mitials

the second retainer. Further, if I do not wish for The Semrad La w Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: Oct. 27, 2016

Attorne*x*

Viotacl V Mackavi

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 66 of 70

Debtor 1 Gregory	L	Ward	Case number (if kno	wn)
First Name	Middle Name nestions for Reporting Purpo	Last Name		
Part 6: Answer These Qu 16. What kind of debts do you have?	16a. Are your debts prima "incurred by an individe" No. Go to-line 16b Xes. Go to line 17	rily consumer dedual primarily for one of the consumer of the	a personal, family, or hous ots? Business debts are de through the operation of the	ebts that you incurred to obtain he business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid the No.	nter 7. Do vou estir		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,00	00-5,000 01-10,000 001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10 \$50	000,001-\$10 million 0,000,001-\$50 million 0,000,001-\$100 million 0,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10 \$50	000,001-\$10 million ,000,001-\$50 million ,000,001-\$100 million 0,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below		I de alore un	der penelty of periuny that	the information provided is true and
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2			
	Signature of Debtor 1 Executed on 10/27/2 MM /	0 0	Executed	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 67 of 70

Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Gregory	L	Ward	
_	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	—
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
Case number			(State)	
(If known)				Check if this is an
Official	Form 106De	С		amended filing
			tor's Schedule	S 12/15
f two morried	noonle are filing togethe	r both are equally resp	onsible for supplying corre	ct information.
You must file tl	his form whenever you fi	le bankruptcy schedule:	s or amended schedules. M	laking a false statement, concealing property, or obtaining
money or prope	erty by fraud in connecti	on with a bankruptcy ca	ise can result in fines up to	\$250,000, or imprisonment for up to 20 years, or both. 18
U.S.C. §§ 152,	1341, 1519, and 3571.			
(
Part 1: Sign	Below			
	дин апаленту выстране а проток паста и паста положения	L. I. NOT Alle		kruntov forms?
Did you pa	ay or agree to pay some	one who is NOT an attor	rney to help you fill out ban	Kruptoy Iorina:
✓ No				
Yes. N	Name of person			Petition Preparer's Notice, Declaration, and
			Signature (Official F	om 119).
Under nor	alty of parium. I declare	that I have read the su	mmary and schedules filed	with this declaration and
	are true and correct.	_ 1		
X /s/ Grego	my Ward	1120 B	, x	
Signature o		Www 1/	Signatur	e of Debtor 2
Date 10/2	7/2016	U	Date	

MM/DD/YYYY

Date 10/27/2016 MM/DD/YYYY

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 68 of 70

Debtor 1	Gregory	L	Ward	Case number (if known)
	First Name	Middle Name	Last Name	CONTRACTOR OF A CONTRACTOR OF
cre	ditors, or othe r part		lid you give a financial stater	ment to anyone about your business? Include all financial institutions,
	No Yes. Fill in the deta	ils below.		
ب			Date issued	
	Name		MM/DD/YYYY	_
	Number Street			
	City	State Zip Code		
Part 12:	Sign Below			
true a bar	and correct. I undersolven case can resolven for the large case can resolven for the large case can resolven for the large case can resolve ca	regory Ward a Debtor 1	e statement, concealing prop 1000, or imprisonment for up t	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date
Did y	ou attach additional	pages to Your Statemen	nt of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
	lo ′es			
Did y	ou pay or agree to p	ay someone who is not a	n attorney to help you fill ou	t bankruptcy forms?
	lo /es. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 69 of 70

Debtor	Gregory	L <u></u>	Ward	Case number (if	_
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpire	d Personal Property Lea	ses		
informa	tion below. Do not list	roperty lease that you listed real estate leases, Unexpire Il property lease if the truste	d leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).	
Des	scribe your unexpired p	personal property leases		Will the lease be assumed?	
Les	sor's name:			No Yes	
	scription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:			_	
Les	sor's name:			No No Yes	
	cription of leased perty:				~~~
Les	sor's name:			No Yes	
	cription of leased perty:				
Less	sor's name:			No Yes	
	cription of leased perty:				
Less	sor's name:			□ No □ Yes	
	cription of leased perty:				
Less	sor's name:			No Yes	
	cription of leased perty:				
Part 3:	Sign Below			GAIN 4 COLOR TO THE COLOR TO TH	
Unde	r penalty of perjury, I d	declare that I have indicated	my intention about any p	property of my estate that secures a debt and any personal	
	erty that is subject to a	H \ \ \	£ *		
	s/ Gregory Ward gnature of Debtor 1	try war	Y-17	nature of Debtor 1	
Da	te 10/27/2016 MM/DD/YYYY	U	Date	e MM/DD/YYYY	

Case 16-34370 Doc 1 Filed 10/27/16 Entered 10/27/16 17:03:27 Desc Main Document Page 70 of 70

UNITED STATES BANKRUPTCY COURT Northern District of Illinois

In re:	Debtor(s)	Case No	Case No		
		Chapter.	Chapter7		
	VERIF	ICATION OF CREDITOR MAT	RIX		
Ti knowledge		rify that the attached list of creditors is tr	ue and correct to the best of their		
Date:	10/27/2016	75/ Ward, Gregory L	VL Mryan Wal J.		